T AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Applicat	ion or Docket Number
-	852032-1

PATENT APPLICATION	on FEE DETERM tive October 1, 20	INATION TIES I		011	1)(10			-
Ellec	IIVE COLO	1	SMA	LL ENTIT	Y OR	OTH	ER THAN LL ENTITY	
CLAIMS AS FILED - PART I (Column 1) (Column 2)			TYP		EE	RAT	E FEE	7
TOTAL CLAIMS	IMS				0.00 OR	BASIC	FEE 740.0	0
FOR	NUMBER FILED	NUMBER EXTRA	 		OR	V01	l l	
TOTAL CHARGEABLE ÇLAIMS	/ () minus 20=	*	 	(\$ 9=		Vo	4=	
	minus 3 =	= *	 	X42=	OF	 	_	7
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM	J L	+140=	OF					
* If the difference in column	is less than zero, en	ter "0" in column 2	-	TOTAL	0			
* If the difference in column	S AMENDED - PA	Am i ii.	3)	SMALL EN	NTITY O		THER THA	DDI-
(Column	1)	IIGHEST	71 [1	ADDI- IONAL	R	ATE TIO	NAL
CLAIMS REMAINI	NG PR	NUMBER PRESENT EVIOUSLY EXTRA	'	RATE	FEE	-		EE_
APIC	IT .	PAID FOR =	7 [X\$ 9=		OR X	\$18=	
Total *		3 =	7	X42=		OR)	X84=	
Total * // Independent * 2 FIRST PRESENTATION	Minus ***	DENT CLAIM		+140=		OR 4	280=	
FIRST PRESENTATION	OF MOET.			TOTAL		OR AD	TOTAL DIT. FEE	
	•			ADDIT. FEE		,		
(Colur	nn 1)	(Column 2) (Column HIGHEST			ADDI-	Γ		ADDI- IONAL
CLA REMA	MS -	NUMBER PREVIOUSLY EXT		RATE	TIONAL FEE			FEE
AFT AMEN	MENT	PAID FOR		X\$ 9=		OR	X\$18=	
Total *	IVIIIus	**		X42=	1	OR	X84=	
	Minus DEPE	NDENT CLAIM				OR	+280=	
Independent * FIRST PRESENTATION		+140= TOT/		- 1	TOTAL			
6				ADDIT. F	Ë L	_1 0,,	ADDIT. FEE	
Ö		(Coldini -	umn 3)		ADDI	7		ADD
(Co	umn 1) LAIMS		ESENT XTRA	RATI	E TIONA	L	RATE	TION FE
RE RE	MAINING AFTER ENDMENT	PREVIOUSLY EXPAID FOR			FEE		X\$18=	T
MMA WELL	Minus	**		X\$ 9	= .	-\OF	Y84=	+
Total * Independent *	Minus	***	П	X42	=	OF	1	+-
FIRST PRESENTA	TION OF MULTIPLE DE	PENDENT CLAIM		+14	0=	OF		
S	u - nitru in CC	lumn 2, write "0" in column	n 3.	O" ADDIT	OTAL FEE	0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	È L
* If the entry in column 1 ** If the "Highest Number	is less than the entry in co Previously Paid For" IN TI r Previously Paid For" IN T Previously Paid For" (Total	HIS SPACE is less than 3 HIS SPACE is less than 3	, enter "3. hest num	ber found in	the appropria	te box ir	n column 1.	•
***If the "Highest Number The "Highest Number	Previously Paid For" (Total	or Independent) is the mi	g.1001 11211		t Trademark O	ffice, U.S.	DEPARTMENT	FOF COM
1	·			Patent an	4 11440			

BEST AVAILABLE COPY
PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

. φρ! πίση or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS						ા[RATE	FEE		RATE	FEE		
FOR NUMB		NUMBER FI	LED	NŮMBE	R EXTRA	ı	BASIC FEE		OR	BASIC FEE			
TOTAL CHARGEABLE CLAIMS //			//) minu	ıs 20=				X\$ 9=		OR	X\$18=		
IND	PENDENT CL	AIMS	minus 3 = *					X40=		OR	X80=		
MUL	TIPLE DEPEN	DENT CLAIM P					+135=	7 - 4 - (1) - 1 3 - 74 - 140 - 1	OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLE	NTITY	OR	OTHER SMALL E		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	**			遊	X\$ 9=		OR	X\$18=		
AMENDMENT	Independent		Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM			+135=		OR	+270=		
							Ĺ	TOTAL		OR	TOTAL ADDIT, FEE		
Je .		(Column 1)		(Colu	ımn 2)	(Column 3)	•	ADDIT. FEE I					
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY O FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	**		= /	7	X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	•	Minus	***		=		X40=		OR	X80=		
[©]	FIRST PRESE	NTATION OF M	IULTIPLE DEP	ENDEN	IT CLAIM			+135=		OR	+270=		
				÷			1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Coli	umn 2)	(Column 3)						· ·	
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NE CONTRACT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	•	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	ENTATION OF I	MULTIPLE DEI	PENDE	NT CLAIM		j	+135=		OR	070		
" If the entry in relymn 1 is less than the entry in column 2, write "0" in column 3.													
** If the "Highest Number Previously Paid F r" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													